

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

Estate of John P. O'Neill, et al

Plaintiff,

-v-

The Republic of Iraq, et al

Defendants.

CERTIFICATE OF MAILING

U.S. DISTRICT COURT  
2005 JUN 17 A 10:47  
S.D. OF N.Y.  
04 C. 1076 (RCC)

I, J. Michael McMahon, Clerk of Court for the Souther District of New York, do hereby certify that on the

**June 17, 2005**

I served the

SUMMONS  
COMPLAINT  
NOTICE OF SUIT  
CERTIFICATE OF AUTHENTICITY

Pursuant to the foreign sovereign immunities act (28 U.S.C. §1608(a)(4), filed and issued herein on the  
Dec. 20, 2004

by mailing by Registered mail, return receipt requested, at the United States Post Office, Chinatown Station, New York, N.Y., a copy of each thereof, securely enclosed in a post-paid wrapper addressed to:

See attached for listing of Defendants

*Ref# 300/2510 0005 6700 434/* # \_\_\_\_\_

*J. Michael McMahon*  
CLERK

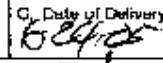
Dated: New York, NY

7. Mohammed Baqer Zolqadr, Iranian Revolutionary Guards Corp.  
Deputy Commander Brig. Gen.

Each of these defendants are to be served at the Iranian Ministry of Foreign Affairs, United Nations Street, Tehran, Iran.

The Republic of Iraq is to be served by the State Department via the U.S. Embassy in Baghdad at the place and in the manner of their choosing.

Enclosed you will find two complete sets of documents for each defendant, one for service and one for the court's file. The documents include a complaint in English, and a translated complaint with verification in Farsi for the Iranian defendants and Arabic for the Iraqi defendant; Notice of Suit in English and the respective

<b>U.S. Postal Service CERTIFIED MAIL RECEIPT</b> <small>(Domestic Mail Only; No Insurance Coverage Provided)</small>		SECTION																					
<p>WASHINGTON, DC 20520</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Postage</td> <td style="width: 15%;">\$ 5.30</td> <td style="width: 15%;">UNIT ID: 0004</td> <td style="width: 55%;"></td> </tr> <tr> <td>Desired Fwd.</td> <td>2.30</td> <td></td> <td></td> </tr> <tr> <td>Delivery Receipt Fee (Endorsement Required)</td> <td>1.75</td> <td>Postmark Here</td> <td>RECEIVED MAIL CENTER 20520</td> </tr> <tr> <td>Return &amp; DU Delivery Fee (Endorsement Required)</td> <td></td> <td>Clerk: KSJJJP</td> <td>AT&amp; 20520</td> </tr> <tr> <td>Total Postage &amp; Fees</td> <td>\$ 9.05</td> <td>06/17/05</td> <td>20520, NW</td> </tr> </table> <p>Street, Apt. No.: Consular Services City, State Zip: Dept. of State, 2120 Pennsylvania Ave., NW, 4th Fl. Wash., D.C. 20520</p>		Postage	\$ 5.30	UNIT ID: 0004		Desired Fwd.	2.30			Delivery Receipt Fee (Endorsement Required)	1.75	Postmark Here	RECEIVED MAIL CENTER 20520	Return & DU Delivery Fee (Endorsement Required)		Clerk: KSJJJP	AT& 20520	Total Postage & Fees	\$ 9.05	06/17/05	20520, NW	<p>COMPLETE THIS SECTION ON DELIVERY</p> <p>A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <input type="checkbox"/> Date of Delivery 06/17/05</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type  <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.     </p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
Postage	\$ 5.30	UNIT ID: 0004																					
Desired Fwd.	2.30																						
Delivery Receipt Fee (Endorsement Required)	1.75	Postmark Here	RECEIVED MAIL CENTER 20520																				
Return & DU Delivery Fee (Endorsement Required)		Clerk: KSJJJP	AT& 20520																				
Total Postage & Fees	\$ 9.05	06/17/05	20520, NW																				
7001 2510 0005 6700 4361																							

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540